



## **Application Data Sheet**

### **Application Information**

Application number:: 10/806,611  
Filing Date:: 3/22/2004 12:00:00AM  
Application Type:: Utility  
CD\_ROM or CD-R?: None  
Sequence submission?: Paper  
Computer Readable Form (CRF)?:: Yes  
Title:: TREATING IMMUNOLOGICAL DISORDERS USING  
AGONISTS OF INTERLEUKIN-21 / INTERLEUKIN-21  
RECEPTOR  
Attorney Docket Number:: 01997.043200  
Request for Early Publication:: No  
Request for Non-Publication?: No  
Total Drawing Sheets:: 6  
Small Entity?: No  
Petition included:: No

### **Applicant Information**

Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Mary  
Family Name:: Collins  
City of Residence:: Natick  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of mailing address:: 54 Rathbun Road  
City of mailing address:: Natick

State or Province of mailing address:: Massachusetts  
 Country of mailing address:: U.S.A.  
 Postal or Zip Code of mailing address:: 01760  
 Primary Citizenship Country:: U.S.A.  
 Status:: Full Capacity  
 Given Name:: Elaine  
 Middle Name:: Y.  
 Family Name:: Chin  
 City of Residence:: Concord  
 State or Province of Residence:: Massachusetts  
 Country of Residence:: U.S.A.  
 Street of mailing address:: 2 Peabody Court  
 City of mailing address:: Concord  
 State or Province of mailing address:: Massachusetts  
 Country of mailing address:: U.S.A.  
 Postal or Zip Code of mailing address:: 01742  
 Primary Citizenship Country:: U.S.A.  
 Status:: Full Capacity  
 Given Name:: Mayra  
 Family Name:: Senices  
 City of Residence:: Peabody  
 State or Province of Residence:: Massachusetts  
 Country of Residence:: U.S.A.  
 Street of mailing address:: 3 Wildwood Drive  
 City of mailing address:: Peabody  
 State or Province of mailing address:: Massachusetts  
 Country of mailing address:: U.S.A.  
 Postal or Zip Code of mailing address:: 01960

Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Deborah  
Middle Name:: A.  
Family Name:: Young  
City of Residence:: Melrose  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of mailing address:: 39 Nelson Road  
City of mailing address:: Melrose  
State or Province of mailing address:: Massachusetts  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 02176

#### Correspondence Information

Correspondence Customer Number:: 45743

#### Representative Information

Representative Customer Number::	45743
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#### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/456,920	03/21/2003

#### Assignee Information

Assignee name:: Wyeth  
Street of mailing address:: 5 Giralda Farms  
City of mailing Address:: Madison

State or Province of mailing address:: New Jersey

Country of mailing address:: U.S.A.

Postal or Zip Code of mailing address:: 07940